

## EXPEDITE THE PROCESSING OF YOUR LICENSE!

Listed are the most frequent errors, which prevent our Processing of new license application. To expedite the processing of your license, be sure to use this "Last Minute Check List" before mailing your application package: **Department of Health/DC Board of Medicine, 64 New York Avenue, NE, 1st Floor, Washington, DC 20002**

### LAST MINUTE CHECK LIST FOR A NEW LICENSE APPLICATION

- ☐ Did you include your **Social Security Number**? Did you include the correct number (or **FEIN**)?
- ☐ Did you include all information pertaining to the **required bond** (if applicable)?
- ☐ Does your **business address** contain the following?  
**Street Address, Floor/Suite, City, State, and Zip Code** of the business?
- ☐ If your name has change, did you include **your new name on a notarized form or supply a valid court document**?
- ☐ Did you **sign** and **date** the application?
- ☐ Is your application **notarized** (if applicable)?
- ☐ Did you recheck your check or money order for correct fee made payable to D.C. Treasurer, including late fee, if applicable?
- ☐ Did you answer **ALL** screening questions, **particularly Section 7, if applicable, AND** did you provided a full explanation and complete details on a separate sheet of paper and attached it to the application form?
- ☐ If you are applying for a new License, did you enclosed two recent passport-size photos with your application?
- ☐ Is your **Clean Hands Act Form** signed and enclosed with application (if applicable)?

### **REMEMBER!!**

**BEFORE YOU SEND YOUR APPLICATION TO THE OFFICE, MAKE A COPY OF YOUR ORIGINAL APPLICATION AND ALL SUPPORTING DOCUMENTS FOR YOUR PERSONAL RECORDS.**